PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

50036/0500

											03	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL		NTITY	OR	OTHER	THAN ENTITY
TOTAL CLAIMS			3	626		r kaje iz	RA'		FEE	7	RATE	FEE
FOR			NUMBER	RFILED	NUMI	BER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			30m	inus 20=	* <i>j0</i>		X\$	— <u> </u>	90	OR		
INDEPENDENT CLAIMS			8 n	ninus 3 =	* 5		X4:	 ?=	2/0	-	X84=	
MULTIPLE DEPENDENT CLAIM PI			PRESENT						1/10	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	+14		140	OR	+280=	
CLAIMS AS AMENDED - PART II								AL		OR	TOTAL	
	2 - Joen	(Column 1)	(Column 2)			(Column 3)	SMALL ENTITY			OR	OTHER SMALL	
AMENDMENT A		CLAIMS		HIGH	EST				ADDI-	1 /		ADDI
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	Έ	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9) =		OR	X\$18=	~
AM	Independent	*	Minus *** MULTIPLE DEPENDENT		OL ALLA	=	X42	=		OR	X84=	
	T WIGHT FILES	ENTATION OF WI	OLTIPLE DE	PENDENT	CLAIM		+140)=		OR	+280=	
								TAL		On	TOTAL	
							ADDIT. I			OR	ADDIT. FEE	
	The state of the state of	(Column 1) CLAIMS		(Colum		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	-
	Independent	* NTATION OF MU	Minus	***	CL AUA		X42:	=		OR	X84=	
	T WOT T TIEDE	WATON OF WE	CIPLE DE	EINDEINT	CLAIM		+140	=		OR	+280=	
							TO1 ADDIT. F			OR A	TOTAL DDIT. FEE	
_		(Column 1)		(Colum		(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		
AMENDMENIC		CLAIMS REMAINING		HIGHE NUMBI		0050511		T	ADDI-	Г		ADDI
		AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	ADDI- TIONAL FEE
בו בו	Total		Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent		Minus	***		=-	X42=	7	***	OR	X84=	
	TINOT PRESE	NTATION OF MU	LIPLE DEF	PENDENT	CLAIM			╬	——	^{OR}		
* If	the entry in colun	+140=			OR	+280=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
T	he "Highest Num	ber Previously Paid	For" (Total or	Independen	t) is the	highest number	found in the	appr	opriate box	in colu	mn 1.	